

**REMARKS/ARGUMENTS**

In response to the Office Action mailed February 28, 2002, Applicants request reconsideration in view of the following remarks.

1-4, 8-10, and 22-24 were rejected as anticipated by U.S. Patent No. 6,322,587 to Quiachon et al. (hereinafter Quiachon). This rejection is respectfully traversed.

Quiachon discloses an expandable, collapsible and flexible intraluminal vascular bifurcated graft. The graft comprises a deformable main tubular member which bifurcates into an ipsilateral tubular leg and a contralateral tubular leg. The tubular member and the tubular legs are each formed of a cylindrical or continuous wall allowing for fluid communication. This graft is for use proximate the aortic bifurcation.

Anticipation exists only if all of the elements of the claimed invention are present in a system or method disclosed, expressly or inherently in a single prior art reference. Therefore, if it can be shown that there is one difference between the claimed invention and what is disclosed in the single reference there can be no anticipation.

The present invention, as claimed in independent claims 1, 8 and 9, is directed to a prosthetic graft for placement by a single delivery catheter at the bifurcation of a common iliac artery into external iliac and internal arteries within the vasculature of a patient. In each of these claims, portions are adapted to be anchored in the external and internal iliac arteries. The present invention, as claimed in independent claim 22, is directed to a system which comprises a first bifurcated prosthetic graft having portions adapted to be anchored in the external iliac and internal iliac arteries.

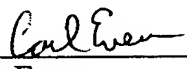
The bifurcated graft of Quiachon is for use at the aortic bifurcation and sized appropriately. The device as claimed in the present invention is for use in the iliac bifurcation and is sized and configured accordingly. Quiachon fails to disclose or even remotely suggest a graft having portions, which are adapted to be anchored in the internal and external iliac arteries.

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Since Quiachon fails to disclose or suggest these elements, there can be no anticipation. Accordingly, reconsideration and withdrawal of the rejection is respectfully requested.

Applicants would be willing to interview the present case if the Examiner so desires. Accordingly, the Examiner is invited to call the undersigned at (732) 524-2518 if such a call would facilitate the prosecution of this application.

Respectfully submitted,

  
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May 6, 2002